

ISSUE SLIP STAPLE AREA (for additional cross references)

FEE TGN	INITIALS	ID NO.	DATE
FEE DETERMINATION	JB		7-30-01
O.I.P.E. CLASSIFIER		8	8-30-01
FORMALITY REVIEW	MH	920	08-31-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 " ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

530  
 8-31-01